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| APPLICATION NUMBER | FILING OR 371 (c) DATE | FIRST NAMED APPLICANT | ATTY. DOCKET NO./TITLE |
|--------------------|------------------------|-----------------------|---------------------------|
| 10/602,897 | 06/24/2003 | Kurt Haggstrom | M-1111-CIP (1502-96 PCT C |

55825
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 MELVILLE, NY 11704

CONFIRMATION NO. 2190



OC000000017440562

Date Mailed: 11/10/2005

NOTICE OF ACCEPTANCE OF POWER OF ATTORNEY

This is in response to the Power of Attorney filed 11/07/2005.

The Power of Attorney in this application is accepted. Correspondence in this application will be mailed to the above address as provided by 37 CFR 1.33.

KIDIST TESFAYE
 PTOSS Q-

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| 10/602,897 | 06/24/2003 | Kurt Haggstrom | 20518/44 (M-1111-CIP) |

Tycon Healthcare Group LP
 15 Hampshire Street
 Mansfield, MA 02048

CONFIRMATION NO. 2190



OC000000017440528

Date Mailed: 11/10/2005

NOTICE REGARDING CHANGE OF POWER OF ATTORNEY

This is in response to the Power of Attorney filed 11/07/2005.

- The Power of Attorney to you in this application has been revoked by the assignee who has intervened as provided by 37 CFR 3.71. Future correspondence will be mailed to the new address of record(37 CFR 1.33).

KIDIST TESFAYE
 PTOSS ()-

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